PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

22 602 -095373

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER TH	
			(Column 1)		(Column 2)		•	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			32				-	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED .		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FÉE	770.00
TOTAL CHARGEABLE CLAIMS			3 2 minus 20=		* 12			X\$ 9=	108	OR	X\$18=	100
INDEPENDENT CLAIMS					* <i>0</i>			X43=	0	OR	X86=	
MU	ILTIPLE DEPEN	NDENT CLAIM P					+145=	(0)	OR	+290=		
* If	the difference	in column 1 is	less than ze	s than zero, enter "0" in co			•	TOTAL	493	OR	TOTAL	
CLAIMS AS AMENDED - PART II										_	OTHER	THAN
	,	(Column 1)		(Colun		(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CLAIM	=]	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	nn 2)	(Column 3))		•			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA	, [RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total :	*	Minus	**		=		X\$ 9=		OR	X\$18=	V
AME	Independent	*	Minus	***	<u> </u>	=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
·								TOTAL		OR	TOTAL	
ADDII. FEE												
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(Column 1) CLAIMS		(Colum		(Column 3)	1 –					
AMENDMENT C		REMAINING AFTER: AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	## .		= .	\prod	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	•	=	↓ ┞	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										υn		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+290=	·
** [the "Highest Nur	nber Previously Pa mber Previously Pa	id For IN THIS	S SPACE is	less than	n 20, enter "20.	· Al	DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
		ber Previously Paid					er foun	d in th app	ropriat box	in col	umn 1.	